

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

Title::

FORMULATION OF ANTIGEN

Attorney Docket Number::

DIA 1809-002B

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

1

Total Drawing Sheets::

1

Small Entity?::

No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship

Country::

Sweden

Status::

Full capacity

Given Name::

Robert

Family Name::

Harris

City of Residence::

Solna

Country of Residence::

Sweden

Street of mailing address::

Huvudstalundsvagen 6

Street of mailing address

line 2::

City of mailing address::

Solna

State or Province of

Mailing address::

Country of Mailing

Address: Sweden

Postal or Zip code of

Mailing address:: S-171 63

Applicant Authority Type:: Inventor

Primary Citizenship

Country:: Sweden

Status:: Full Capacity

Given Name:: John

Family Name:: Robertson

City of Residence:: Stockholm

Country of Residence:: Sweden

Street of mailing address:: Brantingsgatan 51

Street of mailing address

line 2::

City of mailing address:: Stockholm

State or Province of

Mailing address:: Sweden

Country of Mailing

Address: Sweden

Postal or Zip code of

Mailing address:: S-115 35

Applicant Authority Type:: Inventor

Primary Citizenship

Country:: Sweden

Status:: Full Capacity

Given Name:: Anders
Family Name:: Essen-Moller
City of Residence:: Stockholm
Country of Residence:: Sweden
Street of mailing address:: Djurgardsbrunnsvagen 54
Street of mailing address
line 2::
City of mailing address:: Stockholm
State or Province of
Mailing address:: Sweden
Country of Mailing
Address: Sweden
Postal or Zip code of
Mailing address:: S-115 25

Correspondence Information

Correspondence Customer
Number:: 08698
Phone number:: (614) 792-5555
Fax number:: (614) 792-5536
E-Mail address:: rgilcrest@standleyandgilcrest.com

Representative Information

Representative Customer Number::	08698	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
60/415,494	Non-Provisional	Provisional	10/02/2002

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
None			

Assignment Information

Assignee Name::

Street of mailing

Address::

City of mailing address::

State or Province of

Mailing address::

Country of mailing

Address::

Postal or Zip Code of

Mailing address::